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Medical  
Economics



JULY, 1924

# A SEDATIVE OR A TONIC?

Keep well corked in a cool place. Shake the Bottle when  
a precipitate settles at the bottom.

Most cases of neurasthenia and "nervous breakdown" result from physical debility. They require, not a sedative, but a tonic.

## COMPOUND SYRUP OF HYPOPHOSPHITES "FELLOWS"

has proved its efficacy in thousands of cases of this kind. It is a real tonic, not merely a "whip." It promotes nutrition and vital energy, and thus controls nervous irritability.

FELLOWS MEDICAL MANUFACTURING CO., INC.

NEW YORK, U.S.A.

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*Write for samples and literature*

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26 CHRISTOPHER STREET NEW YORK, N. Y.

# MEDICAL ECONOMICS

The Business Magazine of the Medical Profession

H. Sheridan Baketel, A.M., M.D., Editor



Vol. 1

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The Medical Economics Publishing Co., Inc., Publishers.

## This simple treatment gives relief from pain in Entero-colitis



**I**N Entero-colitis, where there is pronounced muscular rigidity and pain, an application of Antiphlogistine applied hot and thick over the entire abdominal wall, not only relieves the pain, but proves a valuable adjuvant to internal medication.

The sustained heat of Antiphlogistine produces a depletion of the enteric and peritoneal vessels and stimulates the solar and hypogastric plexuses.

In Entero-colitis, or any affection involving deep-seated structures, the genuine Antiphlogistine, by its peculiar property of maintaining a uniform degree of heat upwards to 24 hours, stimulates the cutaneous reflexes, causing a contraction of the deep-seated, and coincidentally, a dilation of the superficial, blood-vessels.

Over 100,000 Physicians use the genuine Antiphlogistine—it is the world's most extensively used ethical proprietary.

The Denver Chemical Mfg. Company  
New York, U.S.A.  
Laboratories: London, Sydney, Berlin, Paris,  
Buenos Aires, Barcelona, Montreal, Mexico City

*Antiphlogistine*  
TRADE MARK  
"Promotes Osmosis"

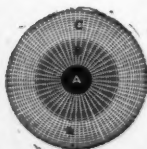


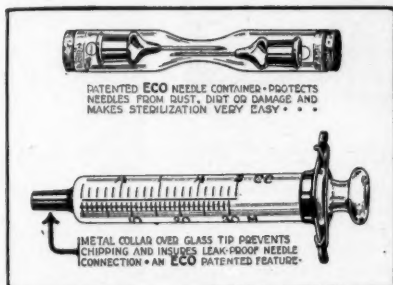
Diagram represents inflamed area. Zone "C" blood flowing freely through underlying vessels, forming current away from Antiphlogistine, whose liquid contents, therefore, follow the line of least resistance entering circulation through the physical process of endosmosis. In zone "A" stasis—no current to overcome Antiphlogistine's hygroscopic property. Line of least resistance for liquid exudate is therefore, in direction of Antiphlogistine. In obedience to the same law exosmosis in this zone, accounts for excess of moisture.



Antiphlogistine poultice after application. Center moist. Periphery virtually dry.



# Eco Products Are Economy



End your hypodermatic troubles by using ECO Platinum (70%) Iridium (30%) needles or ECO Gold Needles on the ECO patent Metal Tip Luer Syringe.

## SPECIAL SUMMER OFFER

	Regular Price
1 Eco Platinum Iridium Needle, 20G- $\frac{1}{2}$ "	\$ .85
1 Eco Platinum Iridium Needle, 25G- $\frac{3}{4}$ "	1.10
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1 Eco 14 Karat Gold Needle, 20G- $1\frac{1}{2}$ "	.60
1 Eco 14 Karat Gold Needle, 26 - $\frac{5}{8}$ "	.25
1 Eco 14 Karat Gold Needle, 27 - $\frac{1}{2}$ "	.25
1 Eco Luer Syringe	1.25
Total	\$8.30
Introductory price	6.50
You save	\$1.80

## Use This Coupon and Save \$1.80

Send me today your special summer offer as advertised in July issue of Medical Economics.

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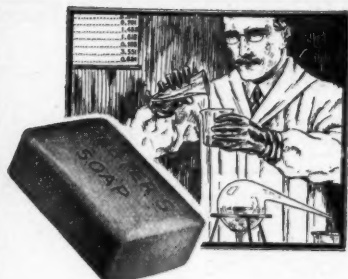
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Send and Bill to.....

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**EISELE & CO.**

**Nashville, Tenn.**



## The Chemist tested seven soaps

—and found REUTER'S least irritating

\* *T*HE red blood cell is one of the most sensitive elements of the human body. Its ability to withstand haemolysis in the presence of different substances is one of the most delicate means for determining the possibility of irritation from the use of these substances on the skin.

So the chemist made the approved tests for haemolytic action with seven widely advertised high-grade soaps (including Reuter's and the best imported Castile) on blood taken from the heart of a guinea pig.

The results showed that Reuter's was decidedly less haemolytic than any of the other soaps and that Castile produced the highest degree of haemolysis. *The chemist proved conclusively that Reuter's Soap is decidedly least injurious to delicate human tissue!* Later advertisements will present other interesting phases of his analysis.

\* From the report of the chemical and biological investigation of Reuter's Soap in comparison with other leading brands conducted by a well-known New York Laboratory.

# Reuter's Soap

Made and  
Guaranteed by

REUTER-BARRY, Inc.,  
26-28 Beaver St., N.Y.

Send to-day for a full sized physicians sample  
and details of the Laboratory report.

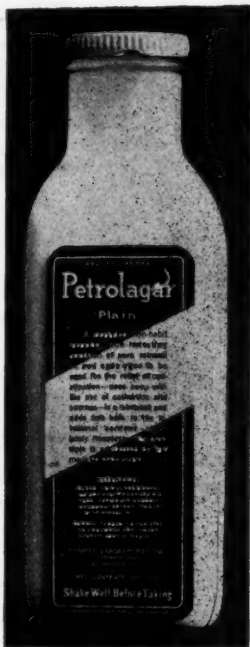
REUTER-BARRY, Inc., 26-28 Beaver Street, New York

Name \_\_\_\_\_

Address \_\_\_\_\_

# Petrolagar

Trade Mark



**A palatable, non-irritating emulsion of pure mineral oil and agar-agar.**

In PETROLAGAR the physician is afforded a preparation in which mineral oil and agar-agar are combined in a pleasant-tasting and efficient product for the treatment of constipation.

The agar is specially prepared so as to yield on incubation in the intestinal tract very many times its original bulk, forming a bland, gelatinous mass which gives the bulk necessary for the healthy peristaltic action of the bowel muscle, without irritation.

The mineral oil is so finely diffused with the agar-agar that it thoroughly mixes with the fecal matter and cannot run to globules but gives full lubrication and thus eliminates the annoyance of leakage accompanying the use of oil in the older forms.

The pharmaceutical methods by which PETROLAGAR is prepared are such that there is no taste of oil whatever. In fact, this elegant pharmaceutical product has the appearance and taste of pudding sauce and can be taken by even the most fastidious

patient without any objection or danger of eructation.

The action of PETROLAGAR, being entirely mechanical, does not interfere with any other medication which may be administered at the same time.

PETROLAGAR is issued as follows: PETROLAGAR (Plain); PETROLAGAR (with Phenolphthalein); PETROLAGAR (Alkaline); and PETROLAGAR Unsweetened (no sugar).

**PETROLAGAR has been accepted for New and Non-Official Remedies by the Council on Pharmacy of the American Medical Association.**

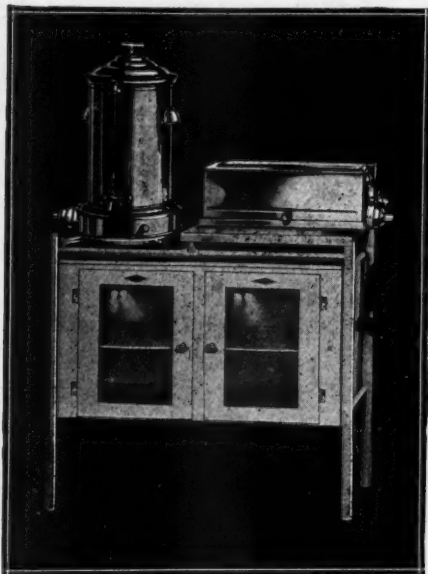
*Write for clinical trial specimen and literature to*

**DESHELL LABORATORIES, Inc.**

3064 West Pico St.  
Los Angeles

Dept. M. E.

589 East Illinois St.  
Chicago



*"Every Office needs  
a good sterilizer"*

No. 1316A

## —to see our offices as others see them

If tomorrow you could see your own office for the very first time, as with the eyes of a stranger, you would notice many things that you don't today.

We are all too close to our work to sense our surroundings. We are too near to catch the deficiencies.

But whether visitors look for a sterilizer or not (that is not the question), your office needs modern and adequate sterilizer equipment. Your work demands the protection that a good sterilizer can give.

# CASTLE

Complete line of Physicians', Dental, Hospital and Bacteriological Sterilizers  
WILMOT CASTLE COMPANY, 1143 University Avenue, Rochester, N. Y.

# First Aid in Office Decoration

Cecil Stanhope

Chicago, Ill.



**D**OCTORS often neglect the effective and harmonious furnishing of their offices, as much as they do their personal health. Quick as they are to see how those on whom they call are affected by gloomy surroundings, they may themselves receive patients in a Mid-Victorian chamber of horrors.

Whether he practices in city or country, in a detached house or in a honey comb of architecture, in modern skyscraper or in an apartment, the office of the physician should reflect his own forceful, dignified, yet attractive personality. Many busy practitioners these days are seeking the expert advice of interior decorators and architects when taking new quarters, or in renovating and improving old ones. The writer has come in contact with numerous problems of this kind, and is therefore offering these suggestions either as first aid instructions, to be followed until the decorator comes, or for the use of those who may find themselves completely at the mercy of their wives.

The reception room is of prime importance, and yet it is that part of the doctor's establishment which is most slighted. It has many faults, but the most glaring is bad illumination. I have often seen in physician's offices, patients herded about a gaudy colored glass lampshade from which

there was not enough real light to enable them to read the back number magazines over which they were squinting. Every one was fidgety and nervous from eye-strain, without really knowing what was the matter.

Suffused daylight and plenty of it is best not only for the doctor's reception room, but for his entire suite. When it is not available, on account of the hour or the location, artificial lighting can be made to answer almost as well for all practical purposes. One of

the first things a "doctor of doctor's offices" does is to extirpate the old-fashioned chandelier, with its glass globes from which a fierce, white light beats through designs of the "heebie jeebie" period. In the

middle of the ceiling he may put a translucent bowl in which are electric lights of from 100 to 150 watts each. The rays are thrown against a white ceiling and reflected downward and they are also sent through the bottom of the bowl. There are also portable, standard lamps surmounted by bowls from which the radiance of a 200-watt globe may be sent both up and down, the bowl itself being masked by a shade. So much for the central or general illumination.

In a physician's reception room, it is desirable that patients have as much privacy as possible, even if there are several there at the same time. Having troubles on

*"How dreadful," is the mental reaction in the minds of many persons who have gone into a physician's reception room for the first time.*

*Such rooms are often atrocities. The study of patient psychology will compel the medical man to furnish his room in the most harmonious fashion possible.*

*Mr. Stanhope, who knows, tells how it can be done at minimum expense and to advantage of the physician.*

their minds, and not caring to converse, they prefer to be as comfortable as they can as they read or look about the room. It is not especially useful from the physicians point of view, any way, that his patients confer over their symptoms and treatment. Therefore, it is a good plan to provide plenty of lamps for individual use. As most American homes and business buildings are wired for electricity these days, every doc-

So marked are the sensations caused by color, that there is a therapeutic art of the spectrum. Such an authority as Alfred C. Bossom, suggests that soft yellow, grays and neutral greens are especially suitable for physicians' reception rooms. The walls can be tinted in cream or in pearl white or various tans. The so-called cartridge papers come in many colorings which are admirably suited for the walls. Expensive



*The arrangement above is disordered and gives one the fidgets. There is no balance. The pictures are too small in proportion to the main features. One sitting in a room like this gets a nervous strain without realizing it.*

tor's office should have outlets along the baseboards where lamps and other electric devices can be plugged into the current. Illuminating devices are so flexible in their uses, that they can no longer be considered "fixtures." Whatever the source of light may be, it should be hidden. Shades of soft hues should be provided for all lamps and wall brackets so that the patients will be saved from the effects of glare.

Whatever color scheme is adopted in decorating the office, all tints should be avoided which have a disturbing effect. Both the physician and the decorator know that bright red irritates, blue may depress, yellow excites. Green is cooling and reposeful.

figured wall paper is not only unnecessary, but has a fussy effect.

For this apartment, a parquet floor is best, as it is not only artistic, but can be readily cleaned. Heavy carpets and filling materials are far from desirable. One large rug and several smaller ones placed rather irregularly on the floor, give a more restful effect than can be gained from using one large rug as though it were a carpet. The Oriental hand-woven rug is more suitable than the machine-made rugs and art squares, because it has slight variations of design, scarcely perceptible to the casual observer, yet which none the less, serve to relieve the eye from monotony. Although more expensive than

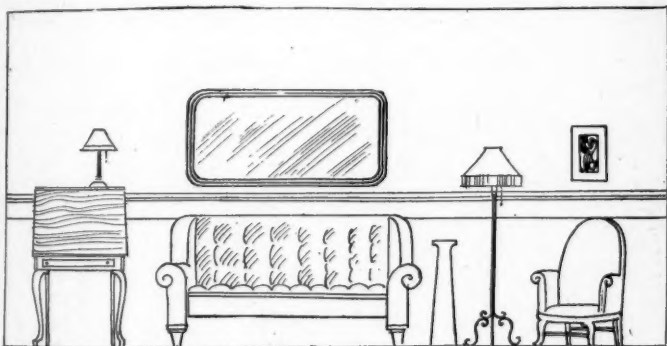
other rugs, the products of the Eastern looms last for many years or even centuries. There is an air of romance about them, too, which interests everybody, and often they divert the attention of patients from their troubles.

The actual furniture of the reception room may be of several periods, but it is well to keep to one or two. A well-known decorator told me the other day that most physicians found that pa-

that heavy overstuffed furniture for a doctor's office is hardly desirable aside from being very costly.

"Having comfortable chairs means a great deal, for the patient who has been sitting in a cramped attitude becomes grouchy and uncommunicative by the time he goes in to see the doctor.

"Sir Basil Thomson, the English detective chief, told me once that when prisoners who are being ex-



*In the above sidewall there is a restful balance. The objects are arranged in proportion. The painting or mirror is large enough for the sofa beneath it.*

tients were invariably in a good humor when they sat in chairs of the old-fashioned Windsor type, which gave them plenty of support for their backs and arms. A light cushion may be used for the seats of such chairs.

"A light chair, which the patient can sway about a little if he likes," added he, "always has its appeal. I suppose that is the reason that a certain doctor in Paris once said that the American rocking chair was a great nerve restorer. All the solid, old Colonial styles of chairs are good. Where an office must be inexpensively furnished, stained wicker or willow furniture, which has plenty of elasticity can also be employed to advantage. I think

amined sit in worn and uncomfortable chairs, it is practically impossible to get them to talk. As the doctor has to elicit information from patients, he should do everything he can to get them in the proper mood, by seeing to it that they are free from strains of all kind while they are waiting to see him."

Another expert says that successful physicians who have consulted him have accepted his advice to avoid any hangings or upholstery or furniture which is red, and to stick to soft browns or greens as much as possible.

One well-known psycho-analyst has furnished his reception room in Gothic, with fumed oak and in very soft grays, with here and

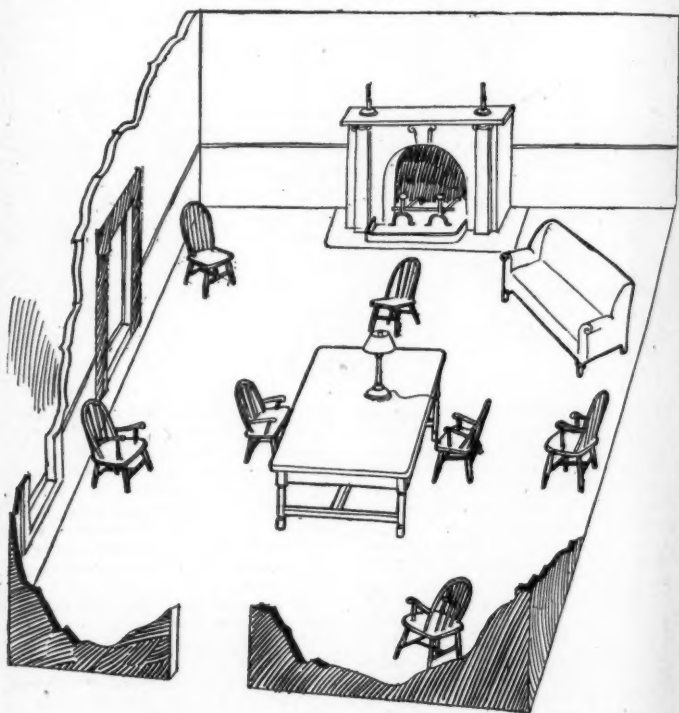


there a touch of brighter colors. Another has adopted the solid, substantial Jacobean style of furniture. However, excellent reproductions of furniture in any period can be obtained at reasonable prices.

Too much furniture, rather than too little, is the prevailing fault among physicians who do their own decorating. One of the best things to leave out is a center table, as it obstructs the patients in passing to and fro, and it may serve as an undesirable rallying point.

It is well to arrange the room, so that patients may automatically find secluded nooks of their own. After the table in the middle has been eliminated, the furniture may be so grouped as to make the fireplace the center of interest. Sofas, chairs, portable lamps and the like can be arranged in groups, and by leaving plenty of space, any cluttered or stuff appearance can be avoided.

Each wall should be considered, as far as possible, as a design or pattern by itself. In the middle of it some important or large object,



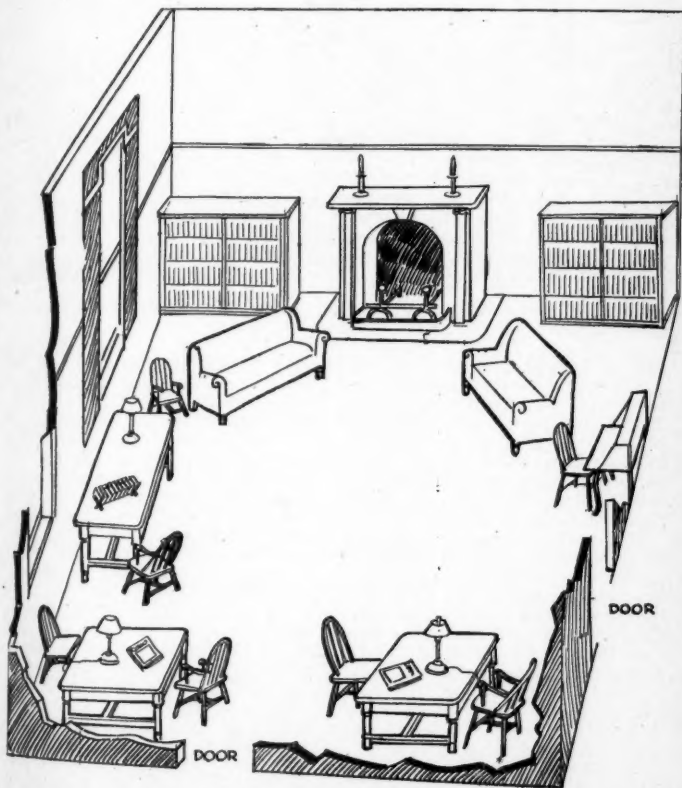
*Prim and formal arrangement of reception room. Floor plan shows arrangement of furniture which focuses in a center table, which blocks the patients as they come in or out, and causes them to glare at each other.*

such as a bookcase or a cabinet, can be arranged.

Although he may not have the remotest idea what has given him such a sensation, a patient may be disturbed by the lack of order or balance in a room, just as much as he may be on tenterhooks on account of bad lighting or an uncomfortable chair. If you have a massive sofa, be sure that you

hang over it a large picture or plaque, not a miniature or a tiny etching. In the same way avoid putting a big picture over a fragile stand or a spindle-legged chair. If there is an important picture on one side of a wall panel, see that it is balanced with something equally effective on the other.

In reception rooms it is well also to leave out all pictures of op-



*Homelike and restful arrangement of reception room. Center of interest is the fireplace, or mantle and its ornaments, while the general arrangement permits the patients to keep to themselves or occupy their waiting time in reading. The open space in the middle permits the unobstructed passage of patients.*

erations, however classic.

Although the walls may be neutral in tone, avoid dull cold, gray pictures. By way of contrast, introduce a bright colored painting or print. Some physicians who are also art collectors make their reception rooms look like studios,

In the workroom of the physician, plenty of light rounded edges, curved corners and intersections and tiled floors are matters in which he has his own way. Glazed or rubber tiles are best for the floors of rooms in which there are operations. Cork flooring, cer-



*"Everyone was fidgety and nervous without knowing what was the matter."*

and the patients like the effect.

Most physicians have two rooms for the treatment of patients, or at least one room and a bathroom, besides the reception parlor. The ideal arrangement would be a suite of three rooms, reception room, office and operating or examining room.

If the doctor has a house or a large suite in a commercial or a professional building, he can send the patients whom he has treated out through a hallway. Where the reception rooms opens directly into the office, it is well to have a screen at one side or the other of the connecting door. The waiting patients do not like to see any evidences of other callers having been subjected to an ordeal.

Decorators usually insist on putting glass cabinets filled with shining instruments, as far in the background as possible. This they do in the belief that patients do not wish to look at that kind of bric-a-brac until obliged to do so.

tain forms of rubber tiling or heavy linoleum does excellently in the consulting room.

In his work the physician or surgeon tries to appear as cheerful and confident as he can. If the furnishings of his examination room are spick and span with enamel; if the place be flooded with light, and all proclaims sanitary care, he has gathered about him allies which make for success and efficiency.

In the selection of equipment the physician has many advisors. In the adornment of his reception room, which plays so important a part in his relations with his clients, he has until recently been giving so little attention that he may now be considered as taking up a new phase of medical economics. He will find it a profitable one.

Some men will work eighteen hours a day in order to hang on to a soft snap.

# A New Economic Fee Basis for Operations

Carleton Dederer, A.B., M.D., M.S. (Surg.)

New York



"How much shall I charge my patient for this operation?"

This question is often a most difficult matter to decide. In major operations there is absolutely no standard by which the patient may know in advance what an operation will cost unless he has a prior agreement with the surgeon.

Furthermore the patient should have some assurance of what the result of his operation will be.

It should be possible to insure the life of a patient who is to have a major operation.

Here is a simple plan which would be feasible and satisfactory to all concerned.

Take a hypothetical case to illustrate the plan:

A wealthy business man goes to a large hospital for a nephrectomy. The institution's surgeons may have found that all but one of three hundred nephrectomies are successful, so far as survival following the operation is concerned. That is, only one in three hundred may be fatal. Further analysis may reveal that in a case like the hypothetical one the hospital mortality may be 1 per cent.

The hospital authorities would state to him that the minimum

fee for a nephrectomy in a case like his is \$500; that in addition to the operation he would also be given insurance for safe recovery from the operation (not necessarily from his diseased condition), for the amount of \$5,000. If, however, he should wish more insurance the cost to him for the operation plus more insurance would be proportional.

Thus, for a thousand dollar fee he would get \$10,000 insurance.

Take also the example of a man in moderate circumstances, such as one who might ordinarily be charged \$150 for an operation for cholelithiasis. He depends entirely on his

own labor to support his family. The fee for him under this plan would be \$200, including payment for life insurance up to the amount of \$2,000, which would be for immediate recovery from the operation, or to be more definite, until he was able to go home.

The details of the adjustments of rates and claims are important and would need to be worked out in the same manner in which the insurance companies have worked out their problems.

In operations there is sometimes more to the problem than

*The proper method of charging for surgical operations has been a bugbear since operations were instituted. Many and various suggestions have been made.*

*Dr. Dederer, a New York surgeon, gives us an idea which is at the same time unique and practical.*

*Some insurance companies would doubtless be glad to offer this service to surgeons and this form of charging, plus protection, might have a distinct appeal.*

the safety of life alone. If a patient is to have an operation for hernia and it is found that in similar cases permanent recovery follows in 98 per cent, the patient might be protected by a recurrence clause in his policy. A similar arrangement might be made, for instance, in tumor cases, benign or otherwise.

When it comes to insuring perfect recovery following an operation for the many diseases of bacterial origin like chronic cholecystitis, diverticulitis, osteomyelitis and the like, the problem has so many sides which are not within the grasp of man to control that insurance for recovery of perfect health is not necessarily the responsibility of the surgeon. However, if he is able to rec-

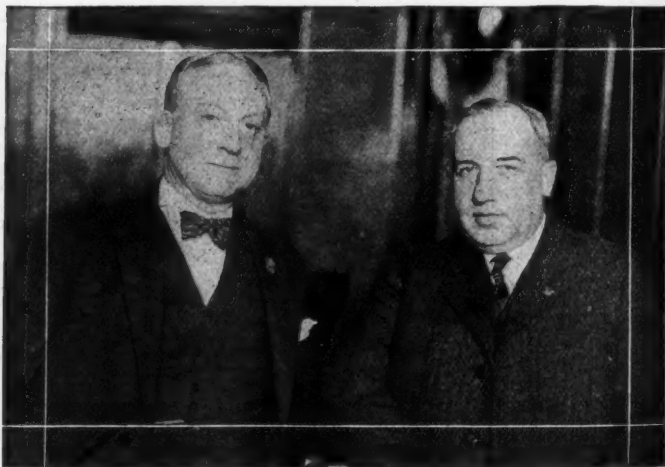
ognize contributing factors such as obscure syphilis or dental foci from "devital" or from unerupted impacted teeth he will help the patient and his own record by treating them properly.

In order to facilitate such a plan for the independent surgeon it would be feasible for insurance companies to carry such surgeons.

The greatest financial benefit to be derived from this plan on the part of the surgeon would be that the patient would naturally pay his fee in advance to secure the protection.

The surgeon who needed the money, and some surgeons do, could then have his mind free from financial worry and could direct his whole attention to the best interests of the patient.

### *Will Direct Destinies of the A. M. A.*



*Dr. William Daniel Haggard of Nashville, Tenn. (left), President-elect, and Dr. Edward Bruce McDaniel of Portland, Ore., Vice-President, were elected to high office at the recent convention of the American Medical Association.*

*Drs. Haggard and McDaniel are leaders in the surgical field in their respective sections and their choice reflects eminent wisdom on the part of the delegates.*

# How a County Medical Society Can Conduct a Periodic Health Examination Campaign

Harold Swanberg, B.Sc., M.D.

Quincy, Ill.



OUT this way, we believe in periodic health examinations.

Further, we practice what we preach.

Running on all fours with the proclamation of the Governor and the desire of State Department of Health, a Health Week was celebrated in most of the counties of Illinois during April and May.

Adams County, in which Quincy is located, was right on the dot in this connection. The County Medical Society, of which I have the honor to be Secretary, was a most active participant.

Result: The best campaign for the education of the public in a single health matter ever carried on here. The affair went off with a bang, and at a total expense of \$5,000.00? No. \$65.00.

How do we do it?

Let me very briefly state in a few paragraphs our plan of campaign.

1. We had posted in the windows of the leading business houses large posters, size 15"x19", entitled "How's Your Health? Have a Medical Examination." These were procured through the Illinois Tuberculosis Association, Springfield, Ill., and were distributed by Boy Scouts.

2. We had printed a special il-

lustrated 4-page folder, size 6"x9", which told the what and why of Periodic Health Examinations in plain language. A supply was sent to every member of the Medical Society for his reception room table, and thousands were distributed during a Parade and Pageant held during Health Week by the Boy Scouts.

3. We secured three copies of the film "Working for Dear Life,"

produced with the advice of the National Health Council by the Metropolitan Life Insurance Co., which has a strong plea for Periodic Health Examinations. This was shown in four Quincy theatres during one whole week

and was seen by thousands. These films were loaned free, except for transportation charges, and were procured from the Illinois Department of Public Health, Springfield, Ill.

4. We had several write-ups pertaining to Periodic Health Examinations in the local newspapers, which were secured through the Lay Education Committee of the Illinois State Medical Society, 25 East Washington street, Chicago, without cost.

5. We furnished banners for the Health Parade, which were made from the posters of Illinois Tuberculosis Association. These banners

*We have to hand it to these Illinois hustlers when it comes to getting results. For instance the Governor of Illinois asks for a health week and the people of the commonwealth put it over with a whoop.*

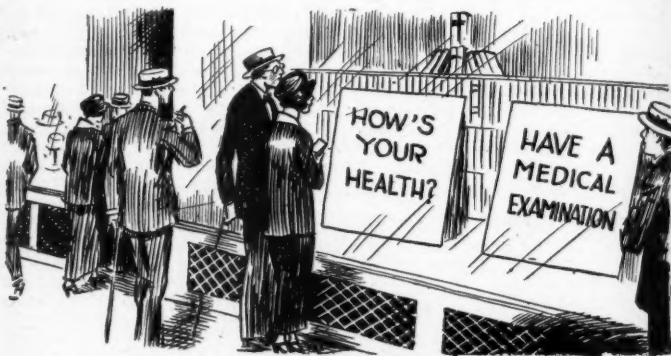
*Dr. Swanberg, who is the live wire secretary of the Adams County Medical Society, is modest, but everyone knows that the part this Society and its Secretary played will make history in the movement for preclinical medicine.*

were carried by Boy Scouts.

6. We purchased a set of 30 beautiful lantern slides, together with a lecture outline, pertaining to Periodical Health Examinations, which were specially prepared for lecture purposes to the laity. Two lectures have already been given and they will be used during the coming year before women's clubs, lodges, civic organizations, etc., by various members of the Society. They were secured from J. A. Rawson, Jr.,

Illinois Association for the Promotion of Periodic Health Examinations, 231 S. La Salle street, Chicago, were distributed to every member of the Medical Society. Also every physician received a copy of Dr. Haven Emerson's instructive reprint, "Periodic Medical Examinations of Apparently Healthy Persons," which explains in detail the objects, technique, etc., of these examinations. (Secure from A. M. A.)

Anyone desirous of securing further data pertaining to a Periodic



*"We had posted in the windows of the leading business houses large posters."*

18 E. 37th street, New York City.

7. For the physicians, we held a meeting devoted entirely to Periodic Health Examinations, at which the value, necessity, methods, technique, etc., were thoroughly explained by three physicians. In addition, blank forms for recording such examinations, as published by the A. M. A. and the

Health Examination campaign, write to the National Health Council, 370 Seventh avenue, New York City, which has given this matter thorough study.

Just what the results of our campaign will be, it is too early to state; however, we believe it cannot help but reflect much good to the local profession.

### **Say It With a Smile**

Personality counts. The inspiration of confidence is one of the greatest factors leading to success in the practice of medicine.

Some one has said that "the whole structure of salesmanship is interwoven into the word hospitality."

A physician must practice the art of salesmanship as much as the man selling goods, even though the methods are different.

Good cheer that smacks of insincerity will soon be recognized and discounted, but the friendly smile and the human touch are assets which no physician can properly do without.



# How Can the Medical Practitioner Advertise?

James E. Clarke

Chicago, Ill.



THIS subject is old, possibly trite to physicians, but it is exceedingly important to the public. According to my present understanding of medical ethics, he cannot utilize newspapers as do other men who have something to sell. As a servant of mankind, the doctor is believed a little aloof from the common herd and he cannot, therefore, do those things which are done by hoipolloi. As a reporter for the daily press it is a bit difficult to grasp this slant.

The best method yet presented for the physician to advertise his ability to the profession, my doctor tells me, is through the medium of the written word. Most practitioners see cases which would be of value to the profession if they were published. Interesting medical phenomena are made manifest in *Painted Post* quite as much as in *Philadelphia*, although the volume may not be as great. If the case is seen in *Philadelphia*, it is more than likely to find its way into the medical press. If it comes to light in *Painted Post*, it is quite certain to be unheralded and unsung. Why? Because the *Philadelphia* observer, having been trained along proper lines, knows what to do, whereas his country confrere either does not think of reporting the case or is naturally hesitant on account of lack of writing experience.

Most men, if they will try sufficiently, can present matters which would be acceptable to the average lay editor and do not believe the medical editor is such a fearsome person. Doctors have a little

time after the hurry of the day's work when they can sit down and ruminate over their cases, instead of playing solitaire or joining the wife in a little game of euchre, they could to far better advantage put down their thoughts on paper.

The next night the doctor should go over the thoughts again and possibly rewrite what he has written. The more he writes, the more he becomes interested in the subject and he will want to pull down some of the old books and look up some references. By shaking up the article the salient facts will have sunk to the bottom and without any particular effort on his part he can set down his ideas in orderly fashion. The article may not be written with all the grace that would characterize the polished author but the medical editor does not look for beautiful diction on the part of his contributor. If the doctor will present the facts the editor can whip them into readable shape. It is simply a question of writing and discarding and writing again, putting down all the fleeting thoughts that may come to mind and then getting order out of chaos.

If the average physician would remember that writing enables him to fix definite medical conclusions in his mind and makes him a better observer of symptoms and findings, he would make the art of writing a part of his duties. There are in some of the smaller towns, scattered throughout this country, physicians who are potential medical authors. In the search for news which has carried me from

one section of the country to another from time to time, I have received some of my most important facts from the country doctor. These observations have led me to the belief that he is usually a very keen observer and I have often wondered in looking over medical journals why the bulk of the articles come from city doctors. It seems to me to be a reflection on the small city and the town

physician that he does not put his facts into shape and thus be in a position to advertise himself in the only way which I understand doctors can advertise.

My advice as a writing man to doctors who are non-writers would be to so train themselves that they can utilize their experience and thus add it to the other things which come out of the great medical centers.

## Taking Pen in Hand

Why is the physician not a frequent medical journal contributor?

The brief article immediately preceding is written by a daily newspaper reporter who seeks to stimulate non-writing physicians to the preparation of medical articles. Much that he says is true. MEDICAL ECONOMICS is particularly interested in this subject because doctors are not yet educated to the necessity of properly regarding the economic side of medicine and setting down their ideas thereon. We are constantly in receipt of interesting articles having to do with the professional side of medicine, but they cannot be utilized because this journal is devoted solely to the business end of medical practice.

We wish that our readers would apply the thoughts in Mr. Clark's article to themselves. There are very few doctors who are not doing something in a business way which is a little different from that of the other man. They have something unique in the way of

bookkeeping; of office arrangement; of employing office nurses; of making investments; of collecting their bills, etc. They have been carrying out these details so long that they see nothing extraordinary in them, despite the fact they may be quite unusual.

Why not tell the editor? If the idea is stale, we will say so; if it is new, we will gladly publish it.

Many physicians have novel ways of spending their vacations. Why not tell the others about them? Some men have some distinctive thoughts on the subject of automotive locomotion. If one doctor can get more mileage out of his car by doing something which the other man does not do, why not write about it? If he has a scheme of utilizing a man as chauffeur part of the day and as an office assistant during his office hours, tell the story. All of these things may seem small to the physician himself but they are of distinct interest to the others who are not doing them.

Get the writing habit. It aids in perfecting check writing ability.

*The old family doctor of a few generations back made his rounds on horseback. In the capacious confines of his saddlebags were to be found all the instruments, drugs and appurtenances believed to be necessary in the practice of medicine.*

*Have we in this day and generation medical men who depend upon the saddle-horse as a means of locomotion? It would be interesting to devotees of the auto to know how some of their confreres get about among their patients.*

# Doctors' Records and Accounts, F. O. D.

Moreton T. Elkins

Denver, Col.



THE cabalistic initials, "F. O. D.," mean "Free of Dead-wood." Perhaps "F. O. B.," which by intrepertation is "Free of Bunk," would be nearer the mark.

How to keep records and accounts without being a file slave; how to have a systematic grasp of one's affairs without serving as an index card chauffeur, are problems which confront every physician and surgeon.

When tired business men drop into the offices of their medical friends to be advised to go golfing or fishing for a month, they will give all kinds of advice about clean desks and wonderful efficiency systems. They forget to say that their secretaries keep their old letters and newspaper clippings out of the way, and that relays of soft-voiced file clerks are always whisking their litter to snug cabinets.

With all due respect to the "T. B. M.," their ideas on how to keep tabs on a practice are about as valuable as a stethoscope would be in a boiler factory.

Every physician is a law unto himself in this matter of records. The object of this article is not to prescribe a hard and fast system, but to summarize methods which the writer has seen in practical operation in doctor's offices and to make a few suggestions which the busy practitioner can adapt to his special requirements.

There are certain vital things in the keeping of data from which there is no escape.

The doctor's dilemma has two horns; financial and medical.

It is sound medical economics to consider the \$ sign as well as the professional R at the top of the prescription blank.

The loose-leaf ledger is admirable, when in charge of a professional bookkeeper or when handled by that rarest of beings, the doctor who has an inborn, clerical aptitude.

The ledger card, however, is the most practical means of keeping track of fees charged and payments made. One may use the standard card, which is 3 by 5 inches, or, if he prefers, a

little larger one, say, 4 by 6 inches. These cards may be obtained from various makers of office supplies, ready ruled or printed, or the physician may have some made to order, either by his own printer or stationer or by a manufacturer.

The reason why so many card index systems drop into the discard is that they are too prim and set; they lack adaptability to the requirements of the individual who tries to use them.

If the stock forms do not suit you, by all means devise a form of your own. You will thereby gain a personal zest for this necessary work of accountancy and escape that most demoralizing ailment, indexcarditis. Nothing takes the

*Of the ideas for physicians' records there seem to be no end. The plans set forth in this article are especially helpful, on account of their practicality.*

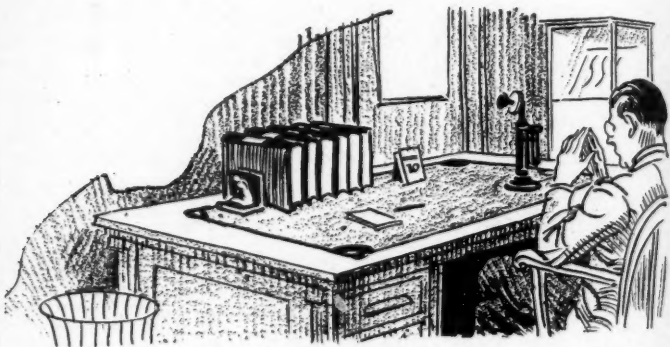
*Good records are indispensable to the busy doctor, and in these days of the income tax, ledger cards are essential.*

heart out of one more than a cumbersome, irksome record system which does not fit one's practice nor disposition.

At the top of the ledger card appears the name of the person to whom the services are charged, his business address, his residence address and telephone number. Then there are columns with such headings as "Date," "No. of Visits," "Fees." On the right of the card appears "Credits" with dates and the amount, and also, a space in which the "Balance" can be entered.

more history still, turn over, and put it on the back of the card. This method is readily adaptable for the practitioner who keeps his records, both financial and medical, with his own good right hand.

Specialists who have large cabinets filled with cards eight by ten inches, with elaborate clinical records thereon and diagrams, usually depend on secretaries or office attendants to keep up the system. If one has no "George" or "Georgiana" to do things for him, the small cards here suggested will fill the bill, with the minimum of



*"What is wrong with this picture?"*

Some physicians have a composite card of imposing size on which they keep elaborate case histories, as well as an account of the fees charged. For the busy general practitioner such an arrangement is hardly desirable. It is better to have a card uniform with the ledger card on which to carry the medical part of the story.

It is amazing to see how much information can be packed on a small card by a doctor who uses condensed language and writes either a small hand or handles typewriter.

In a brief compass, after such printed words as "Name," "Address," "Occupation," "Diagnosis," and "History," a whole life story can be told. If one would write

effort.

According to statistics, there are about seven hundred persons in this country to every physician. For most practitioners, therefore, small drawers or cases with a capacity of from 1000 to 1200 cards each will be sufficient. If not, it is quite easy to add the required units.

It is better to file the ledger card and the history card together back of the initial guide. If one has a small two-tray cabinet, for instance, he can put under the classification "Active" all patients who are being treated and whose bills have not been settled.

Under the slogan "Inactive" would appear the records of persons who are not receiving treat-

*(Continued on page 42)*

# Friend, Help-Mate, Wife

By A Tennessee Doctor's Wife



**Y**OUR magazine finds its way to us. It is clean and wholesome. We read it and are benefited.

I have been a country doctor's wife more than forty years and have perhaps more than an average experience in the trials and triumphs in a doctor's career.

The requisite of filling well the place she chooses when she becomes the bride of the young doctor is legion; and being capable of handling sensibly the oft-limited finances is by no means the only important attribute necessary to the woman who may make or mar her husband's success in his profession.

When they begin life together and the question "Where shall I locate" is settled, they have entered into a partnership, and she assumes responsibilities which help or hinder, according to the way she meets them.

She may know nothing of the science of the profession, but the help and inspiration she can be counts largely in the good done by the doctor himself.

She must be brave, patient, loving and kind, willing to make many sacrifices, realizing that her life must be different from others of her sex, for she has undertaken a splendid work if she does it well.

She must love her husband, love his work, and love the people for whom he labors. In the case of

the general country practitioner she must be, as occasion demands, housekeeper, office girl, nurse, bookkeeper, general adviser, etc.

She must make the home a haven of rest and comfort for the tired man in his few hours of leisure, and keep to herself the petty cares which exist in the life of every busy wife and mother.

The doctor meets in his work sickness, sorrow and death; and

as the years go by, he becomes the confidant of those in trouble.

Unless the wife is unselfish and can at least make the home bright and cheerful there is a strain under which many break down.

Further, she must be the one to whom he can trust the secret of many a tragic story, always relying on her kindness and good judgment to help unravel a tangle and start the erring ones on the right road again.

While the public expects untiring and unfaltering service from the man who should carry relief and encouragement to the home of the suffering, be it palace or hovel, there may be few who think of the perhaps lonely woman, who "holds up his hands," as it were, and fills a place like "the man behind the man behind the gun."

None but those closely associated with the busy doctor, like

(Concluded on page 44)

*What heroines are physicians' wives! Brave, stanch, loyal, they cheer the hardworker on, lightening his load and lighting his path.*

*Rarely has the subject been more delightfully and truthfully handled than by this good (but to the Editor, unknown) lady of the Southland. Poetry is found in her words and love in her heart. May the remaining years of this Tennessee physician and his fair lady be halloved and richly blessed.*

# A Side Income for the Doctor

## Baby Chicks and the Family Nest Egg

F. W. Schroeder, M.D.

Strasburg, Ill.



MUCH has been written in both the medical and the lay press about the disappearing country doctor. When all the votes are counted, however, it simmers down to the fact that he does not fare as well as he did when most of us were boys.

Recognizing that every twelve months brings me just one year nearer the time when my earning capacity will end, and I will be compelled to live on what I have accumulated, I searched for a side income which would hasten the growth of my nest-egg against adversity. The important factor in such an enterprise was that it, of necessity, had to be something that would in no way interfere with my practice.

With this in mind I spent perhaps a year mentally reviewing all possibilities. No practical plan came to my mind, however; either I could not accomplish the thing financially or it interfered too seriously with my professional activities.

As with many men who are so fortunate, it was also in this instance the good wife who found the solution of the problem.

One night she showed me a sample copy of a poultry maga-

zine with an article written by the wife of a successful poultry man. It gave in a general way the stepping stones to his success.

Poultry—who would ever have thought of making a fortune out of poultry, even if they were pure bred, fancy stock. An idea was born. I first searched for facts about poultry and found an immense industry with a dozen or more most excellent special journals. I learned that many men

and women had become financially independent, quite a number even acquiring considerable fortunes. I found one man who had become a millionaire through fancy poultry. I assured myself that poultry

could become a source of profitable employment for my spare time.

The next step was to find out what kind of poultry to raise and how to make the money. Since I saw no book published on that subject, I began accumulating all possible information on what breed to select, how to raise the kind of pullets and cockerels for which many poultry men were getting from \$3.00 to \$75.00 or more apiece, how to mate, incubate, brood and develop such birds, where to advertise and sell, and

*What of the "rainy day"? Is the practice profitable enough to put aside a competence? If not, how about a side line which will not detract from professional standing?*

*Here is an idea for country physicians which has put Dr. Schroeder on "Easy Street." Recognizing the signs of the times, he has grasped the opportunity and made the most of it.*

*Others may desire to consider something of this nature.*

many more features that made the successful breeders successful. The many details had to be understood and coordinated. It took much time to get all the facts and conduct a successful plan of procedure.

I visited and corresponded with successful poultry men, read armfuls of literature—did everything possible to acquire a thorough understanding of the subject.

I began in a small way to raise fine stock which brought me some real money in return for my trouble. The next year I risked more and made more money.

At this time I became interested in the production of baby chicks on a commercial scale. I am interested purely in the monetary returns from my poultry business and every venture is calculated to produce a profit. To do so it must be understood and so I thoroughly studied the baby chick industry for a year. We began with a 2,400 egg incubator. The venture proved so successful that today, after but a few years, it requires 35,000 eggs to fill our incubator once, or for a season, about 165,000 eggs. These chicks are advertised and shipped in special cardboard boxes to nearly every state and into Canada. We guarantee 100 per cent. alive de-

livery. We lost less than \$5.00 worth of chicks in transit in 1923.

It is my estimate that in 1923 the various hatcheries in the United States shipped by parcel post fifty million baby chicks, and the baby chick industry is in its infancy.

Many will wonder how I manage a business of such proportions without interfering with my professional work. The answer is management. The receiving of the eggs, putting them into trays, management of the incubators, selecting or sorting of the chicks, boxing, labeling and keeping of the records is superintended by the good wife (yes, she has three children, 2-6-10 years respectively). She keeps a good maid to relieve her of most of the housework and both the house and the chick industry run smoothly.

The selling end of the business is done through my office. I write the advertisements which are turned over to an advertising agency with instructions as to how many chicks of each variety we will have to sell. This brings a heavy correspondence but this is nearly all conducted by circular and form letter. An hour or two per day clears the desk for the next mail.

(Concluded on page 46)



"I became interested in the production of baby chicks on a commercial scale."



## The Profession

*The Medical Profession has spoken in no uncertain terms*

**V**OTES Votes!! Votes!!!

The mail is filled each day with ballots.

We asked the readers of the May issue of MEDICAL ECONOMICS to vote on two questions:

1. Are you in favor of periodic health examinations?
2. Do you favor advertising the necessities for such examinations in the lay press?

That the questions were of vital interest is manifest by the very large number of expressions received, and by the ideas suggested.

This is written too soon after the appearance of the issue to give adequate information as to numbers, but the nation-wide response, with thousands of votes, representing every state, makes the whole question develop proportions quite undreamed of by us.

That MEDICAL ECONOMICS was justified in directing the attention of the profession to these subjects is decidedly answered in the affirmative. A cursory examination of ballots would indicate that over 94 per cent. of the answers favor preclinical medicine and the propaganda necessary to educate the public in its favor.

From remarks accompanying the votes, it is evident physicians see in this method the best plan of combatting the pernicious activities of the cults.

A study of many of these remarks results in the belief that the question must be treated from several angles and the subject resolves itself into just how it can be handled in order that the desired end can be reached.

We will consider it under five distinct heads, with a number of subheads.

### I. The Use of the Public Press.

1. Editorials.
2. Special articles.
3. Display advertising, prepared, signed and paid for by medical societies as societies, but not as individuals.

## Professor Speaks

terms. *Its members have outlined this program.*

### II. Office Propaganda.

1. Educational pamphlets prepared by medical societies to be placed on office reading tables for the use of patients.
2. Educational placards, short, snappy suggestions, tastily printed, to be framed and hung in office reception rooms.

### III. Personal Efforts.

1. Lectures by physicians on the various phases of preclinical medicine before schools, mothers' clubs, church organizations, teachers' societies, civic bodies, such as Chambers of Commerce, Rotary, Lions and Kiwanis Clubs, lodges, etc.

### IV. Educational Films.

1. Motion pictures showing the value to the individual as well as to the community of frequent physical examinations.

### V. Technic of Examinations.

1. Necessary forms.
2. Time required for making examinations.
3. Adequate fees for physicians' service.
4. Frequency of examinations.
5. Lessons learned from examination.
6. Following up results of examination.

That society and individual effort are combined in a great co-operative campaign to further the cause of longevity and health will be seen from a study of this program.

The medical society, acting as a unit, is the center, around which individual work revolves. By so doing no difficulty can arise, for the Blank County Medical Society distributes its publicity solely as a society, with no personalities considered.

Such a campaign is ambitious, but it can be carried out by even small county societies, which have far seeing, hustling officers.

For the purpose of aiding in this necessary work, MEDICAL ECONOMICS will each month discuss one or more

of the different phases set forth in the program, presenting as models, advertisements, editorials and special articles.

The duty of the medical profession is plain. It has, through carrying out some of the details of preventive medicine, added years to the life expectancy.

It has shown through the work of the Metropolitan Life Insurance Company, that there is a death rate of 28% less among people who are examined periodically.

Why not give every person, old and young, the advantage of longer life?

To aid in this humanitarian effort, MEDICAL ECONOMICS pledges its unqualified support.

## The Law's Mistake

A LAWYER picked up a copy of MEDICAL ECONOMICS for May, while waiting in his physician's office, and read the leading article on "Shall the Medical Profession Advertise."

When admitted to the consultation room, he said, "You doctors are a bunch of boobs. If you keep on making the world a safer place to live in, where will the doctors eventually get off?"

Since the dawn of medicine, its patrons have been seeking to extend the span of life and they will pursue this line until perfection has been reached.

Our legal friend overlooked important facts. If pre-clinical medicine is generally adopted, as it eventually will be, physicians will be kept far busier keeping well people well, than in restoring ill people to health as now.

Children will continue to be born, accidents will still occur, operations will of necessity be performed and special lines of practice will have to be followed.

Indeed the medical profession, with its limited numbers, which seem to be growing more limited, will have to "stand on its toes," to keep all the people well all the time.

We are a profession of life savers, not money makers.  
The lawyer was wrong.

Q. E. D.

When Infants are receiving the proper food, and it is agreeing with them, their flesh is solid—their cheeks rosy—their eyes bright—their muscles firm—their bodily and tissue tone noticeably increased.

## Nestlé's Milk Food

Provides the physician, especially during the hot months, with a clean, safe, milk food that is peculiarly adapted for infant feeding; where for any reason it becomes necessary to replace breast milk, either wholly or in part.

### *Coupon for Sample and Literature*

Nestlé's Food Co.,  
Nestlé Bldg., New York.

Gentlemen:

You may send me, without charge, sufficient Nestlé's Milk Food for a satisfactory clinical trial.

Name .....

Address .....

Druggist .....

# Guaranteed First Mortgage Real Estate Bonds

H. L. Simpson  
New York



**T**HREE essentials are required in any investment—safety, convenience and a maximum interest return consistent with safety.

Aside from the obligations of the United States and sound municipal and state bonds, no other bond possesses a larger margin of safety than the guaranteed first mortgage real estate bond, guaranteed by the issuing corporation, both as to principal and interest from date of purchase to maturity.

Safe because the bond has behind it the greatest security in the world — income-

producing real estate of proven worth. Convenient in the simplicity of caring for them, and collecting the income. Kept in a safe deposit box they are free from fire and theft; registered as to principal, they are of no value in the event of being lost or stolen, only to the registered holder, and the income is collected by the simple act of cutting off the coupons twice a year. From the standpoint of return, the interest is as liberal as the laws of strict safety will permit.

Thousands of shrewd investors are favoring guaranteed first mortgage real estate bonds, the underlying characteristic which makes these bonds desirable being their enviable record of safety and the fact that their parity has never been disturbed by economic conditions and the fluctuations of the Street. Another important factor

which contributes largely to their safety is the unusual care with which the mortgages are selected by the banking institutions which specialize in this type of investment.

Let us analyze the different types of first mortgage real estate bonds offered to the investing public.

The purchase of "participations" in real estate mortgages has become so popular in the last few years that a great many small concerns have gone into the business in competition with reliable

houses, causing a mushroom growth in this particular investment field. For this reason, the greatest discrimination is required by the investor in analyzing

the merit of mortgage bonds. Real estate bonds should only be purchased after a searching investigation as to the financial standing and integrity of the house issuing them.

In purchasing unguaranteed mortgage securities, great caution should be exercised by the investor.

In the first place, these mortgages are often issued against speculative building projects and the loan is sometimes in excess of a conservative appraisal of the property. In this case the public is purchasing the obligation of the borrower, because in case of default, the borrower will abandon

*The best is none too good for the conservative investor. The physician should stand at the head of that class, for he has little time or opportunity for speculation.*

*Mr. Simpson, as director of service of the Prudence Company, is in a position to speak advisably, as to safety in real estate bonds.*

(Continued on page 30)

# A Shoe Should Not Be a Splint!

The proper treatment of what is termed "weak foot," from which 75% of all people suffer, more or less, is such support as will permit and produce exercise of muscles and ligaments.

## More Careful Diagnosis

will prove that many cases of rheumatism of the feet, neuralgia, neuritis, edema of feet and legs, backache, cramps, pain, aching soreness in the feet, are due to weak foot, and can be effectively treated by prescribing the right kind of a shoe.

The right kind of shoe must have a flexible shank, a straight inner border, room for all the toes, broad heel of moderate height, so constructed as to gently tilt the foot on to its outer border.

## The Cantilever Shoe

has been evolved and developed by careful study of the causes and treatment of "weak foot."

It forces the feet to exercise. It forces the foot muscles and ligaments to act naturally. It is not a splint—or an ugly, clumsy, orthopedic shoe. It is attractive, modish, comfortable, durable, economical.

CANTILEVER SHOES should be worn by those who have normal feet as well as by sufferers from "weak foot." They should appeal especially to the physician for personal wear.

There is a Cantilever Shoe Shop in nearly every City

Send for booklet, "Understand the Understanding,"  
written especially for physicians

---

MORSE & BURT CO.,  
412 Willoughby Ave.,  
Brooklyn, N. Y.

Send me booklet, "Understand the Understanding."

.....M. D.  
.....  
..... St.  
..... City ..... State  
..... 1924

the property to the bondholders whenever the income of the project falls below the charges necessary to take care of the interest and amortization payments. The company marketing this class of security is under no obligation to make good to the investor as they guarantee nothing, their agreement being a mere promise to pay 6%, 6½% or 7%, as stated in their advertisements or circular matter.

It is interesting to note that reputable, established companies with enviable records are ready and willing to loan money at the rate of 6% on prime first mortgage, some of the title companies are loaning as low as 5½%. These are the houses which guarantee with their entire resources the first mortgage securities which they sell to the public.

These mortgage investments are the direct obligation of the companies selling the securities and are not the obligation of the borrower.

These companies transact their business under the supervision of the New York State Banking Department and confine their activities to the sale of securities, which are issued strictly against income-producing real estate that is worth 50 per cent. more than the amount of the loan and thus become legal

for trust funds in the State of New York. Such mortgages are deposited with a reputable trust company which acts in the capacity of trustee for the investors.

Therefore, it is not strange that aside from a large army of private investors, insurance companies, banks and trust companies habitually invest a considerable portion of their money in such mortgages.

One of the principal advantages of real estate bonds is that the investor receives a higher yield than from other bonds of an equal degree of soundness. They also appeal to local investors who desire to see their city grow and improve, and "who like to see what they are investing in."

It is a good idea to avoid purely new construction bonds altogether. They are too involved with considerations of mechanics' liens, building construction specifications, deposit safeguards and general uncertainties. In many cases, such

bonds are underwritten on properties where the neighborhood is already overbuilt or outside of good renting districts, and in many cases the borrowers are men of little or no financial responsibility, whose bond for specific performance of contract would be of

(Concluded on page 46)



*"Safe because the bond has behind it \* \* \* income producing real estate proven worth."*



# No Soap—No Chalk No Magnesia

The old theory was to apply an alkaline dentifrice, to neutralize mouth acids.

Modern research proved the fallacy of that. An alkaline product, in its reaction, reduces the alkaline index of the saliva. Mild acids, like fruit acids, have the opposite effect.

Of course, constant alkalinity is better than transient alkalinity. Nature's methods are better than artificial methods. So Pepsodent is mildly acid, to conform with these modern principles. It omits all alkaline products.

## Some mild acid effects

Peoples who eat much fruit, as in the Tropics, are notable for well-protected teeth. Pepsodent applies a like principle in a twice-daily way.

Mild acidity increases the salivary flow and reduces its viscosity. It increases both the alkaline index and the ptyalin index. The ptyalin is there to digest starch deposits on teeth.

Mild acidity acts to curdle fresh mucin plaque, and to disintegrate the plaque at all stages of formation.

Nature intended these results from diet. But modern diet too often fails to bring them.

Then Pepsodent includes an ideal polishing agent, far softer than enamel. Exhaustive tests have proved it harmless to enamel. That is efficient in removing the curdled or disintegrated plaque.

We want all dentists to have a complete understanding of Pepsodent's principles and effects. Let us send you authoritative literature.

**Pepsodent** PAT. OFF.  
REG. U.S.

*The Modern Dentifrice*

THE PEPSODENT COMPANY, 4040 Ludington Bldg., Chicago, Ill. 1664

Please send me, free of charge, one regular 50c size tube of Pepsodent, with literature and formula.

Name .....

Address .....

Enclose card or letterhead

## New Instruments and Appliances

*Our readers are requested to advise us of new and improved instruments, appliances and equipment. Where possible always furnish photographs or drawings.*

### La Force Improved Adenotome

The Frame and Finger Rings are forged in one piece of the best steel. This eliminates one part, making it a two-piece instrument plus the blades.

are made of the finest Rolled Spring Steel uniformly tempered and fitted with the usual Standard French Lock. When this Blade is pushed forward, it slides be-

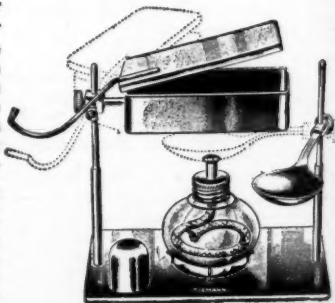


The sliding arm is held in place by a stud pin and button. This is a simpler method than the old style of overhanging lips which break off very easily and are hard to repair. It also has a large comfortable Thumb Ring. The blades

tween two cutting edges, which facilitates the cutting operation; most of the old style adenotomes have only one cutting edge which is not so effective. Manufactured by F. Haslam & Co., 83 Pulaski Street, Brooklyn, N. Y.

### Hughes' Sterilizer

This Sterilizer is designed for physicians' or nurses' use, either in office or at patient's home. The apparatus consists of a metal base with two swivel uprights, to the center of which is a removable alcohol lamp. One of the uprights supports a spoon for sterilizing medications and the other supports the sterilizer,  $4\frac{1}{2} \times 2\frac{1}{8} \times 1\frac{1}{8}$ , which is supplied with a lever and attachment for raising and lowering the lid. The lid and lever are so arranged that they maintain the lid when opened and the sterilizer is set at a point where the hottest portion of the flame



reaches. The apparatus is very substantially constructed and is easily dissembled for carrying. Manufactured by the George Tiemann & Company of 107 East 28th Street, New York City.

### The Hood Head Lamp

A lamp which is finding great favor among surgeons was recently perfected by the J. Sklar Manufacturing Co. of Brooklyn and is illustrated herewith. This is known as the Hood's Electric Head Lamp.



Particular attention in the designing has been paid to the avoidance of undue heat and the manufacturer states that three of the lamps were burned for one hundred hours, at the end of which time one could touch the reflector to the face without causing discomfort.

The flexible wire-cords carrying the current are soldered at their tips so that the ends make one solid wire to fit into the connections and avoid the danger of short circuits from stray wires. The reflector is of heavy aluminum, well ventilated and polished.

Adjustments can be easily made and when adjusted the lamp stays in position without frequent tightening of screw. The band is of genuine cowhide, cords are silk covered and fittings are of the best quality throughout. Manufactured by J. Sklar Manufacturing Co., 133-143 Floyd Street, Brooklyn, N. Y.

### A New Diagnostic Set

The Diagnostic Set which is illustrated herewith consists of a battery handle with otoscope, ophthalmoscope and tongue depressor attachment, all electric lighted.



### PARALLEL RAYS PENETRATE TISSUE

That is why Thermolite has a highly polished parabolic reflector, like a search light, which throws a light beam of parallel rays that penetrate deeply, increase circulation by relieving congestion with its consequent pain, and promote tissue repair.

There is no focal spot to burn or blister, even in prolonged applications. All the heat generated is used for treatment, thereby reducing current consumption and maintenance cost to a minimum.

Radiant Heat is becoming exceedingly popular with the profession, as it is more efficient than superficial hot applications and has the advantage of combination with Light. A trial of

## Thermolite

Radiant Light and Heat  
**Applicator**

will convince you of its merits. Thermolite is scientifically designed and well made. Used in Government hospitals, clinics of large industrial organizations, and in private practice for treating:

Colds  
Eczema  
Rheumatism  
Female Complaints  
Lumbago  
Neuritis  
Sprains  
Erysipelas  
and many other ills.



Illustration shows Office Applicator No. 0670, 12" diameter, with stand, at \$30. No. 0645, Hand Applicator, has same design, 8" diameter, without stand, at \$10. Folding stand for No. 0645, \$6.00. Genuine Thermolites are branded—Look for the name on top of applicator. It is your guarantee of satisfaction.

Write for literature on Radiant Light and Heat

**H. G. McFADDIN & CO.**  
42 WARREN STREET NEW YORK  
Makers of Lighting Devices for 50 Years

The various heads are interchangeable on the same handle and

up in a black leatherette case. Manufactured by the Electro Sur-



the tongue blade attachment is supplied with wooden tongue depressors so that they can be discarded after use. The set is put

up in a black leatherette case. Manufactured by the Electro Surgical Instrument Company of Rochester, N. Y., and sold by surgical supply dealers throughout the country.

### Vanity of Vanities

A company has been established to take second mortgages on automobiles, charging a fabulous rate of interest. A man who must take a second mortgage in order to purchase a car had better walk, or use the trolleys.

Such financing should be discouraged, for it can only lead the borrower into the deep waters of financial despair.

"Keeping up with the Joneses" is the cause of many a man's going on the rocks. We have known of physicians who, in order to drive a car better than they can afford, have given chattel mortgages on their furniture.

"Vanity of vanities, all is vanity." Better a flivver and paid for than a Rolls-Royce and one's neck in the noose of some financial charlatan.

### Pocket Size Reading

"Why is MEDICAL ECONOMICS smaller in size than the other medical journals?" is a question frequently asked by our readers.

Medical men cannot sit down and read uninterruptedly. They have to snatch their reading as they can, in their cars, if they have chauffeurs, in street cars, and in all sorts of odd places.

MEDICAL ECONOMICS can be placed in the coat pocket and is thus available at all times. If it were regulation size it would be left in the office and perchance, as is so often the case, allowed to remain in the wrapper for weeks on end.

Many physicians would become discriminating readers if more books and magazines were of the size which could be carried in the pocket.

Some good fiction, travel and biography with a dash of science would fit in well with the physician's necessary professional reading.

The man who does not possess the reading habit should cultivate it. Reading lifts one out of oneself into other realms. Few of us possess so broad a viewpoint that it cannot advantageously be enlarged.

## The Oldest Prescription

In the July issue of *The Bloodless Phlebotomist* there is an article entitled, "Is this the oldest prescription in the world?" The prescription in question, which is inscribed upon a tablet of stone, now in the Metropolitan Museum of Art, is alleged to be 3,400 years old, and has among its ingredients semi-precious stones, which were ground to powder. The article is illustrated by a very good picture of the tablet. The inscription upon the stone is as clear and neat today as when it was given by a doctor-priest to a subject of one of the ancient pharaohs, 1,500 years or more before the Christian era. This is a matter which is of interest to all physicians. Any who have not read the article in the *Phlebotomist* may obtain a copy of that journal by addressing The Bloodless Phlebotomist, 22 Grand street, New York City.

## The Perforated



## Does Not Adhere to Wound

When applied direct as in burns, ulcers, mangled fingers, etc., serves as a foundation for the forming granulations, but does not stick and tear them or cause pain when removed. Air, drainage and medication provided for through the perforations of the soft transparent dressing. Easily sterilized and does not deteriorate on account of age or hot weather. Order "Standard Perforate" roll, 9 in. x 4 yds., \$1.75.

At All Supply Houses  
Sample of request

**THE CILKLOID CO.**  
MARSHALLTOWN, IOWA.

## A NEW ACCURACY IN BLOOD PRESSURE READINGS

# Baumanometer

**\$2.00**  
BRINGS  
IT TO YOU

So gravely important are blood pressure readings, successful physicians take no chances. Thousands have laid aside old instruments and adopted the Baumanometer for greater accuracy.

## Employing Nature's Law Insures Absolute Accuracy

The unfailing reliability of gravitation method made use of. The scale of every instrument individually hand calibrated, another fundamental of scientific accuracy. Cannot spill; no air-pockets. The variation of other instruments of 10 to 30 mm. impossible.

## Leading Men, Institutions Use It

Dr. Janeway of Johns Hopkins, Rockefeller Institute, Mayo Clinic, Yale and Harvard Medical Schools and many others use it. Metropolitan Life Insurance Co. bought 1000.

Portable desk model (14½ x 4½ x 2½ inches). With Free Manual.

## MAIL COUPON

A. S. ALCO CO.  
625 OLIVE ST., ST. LOUIS, MO.  
I enclose first payment, \$2.00. Send Baumanometer complete on 10-day's trial. If I keep it, I will pay balance, \$30.00, in 10 monthly payments of \$3.00, without interest. I agree title remains in you until paid in full.

NAME .....

ADDRESS .....



## 10 DAYS' TRIAL-EASY TERMS

Send just \$2.00 and we will forward it to you at once. Try it. If not thoroughly satisfied return and get your money back. If perfectly satisfied, send the balance in ten monthly installments of \$3.00 each; without interest—\$32.00 in all complete, which is the regular cash price everywhere.

## Financial Department

*The purpose of this column is to provide the physician-investor with reliable investment information and to help him in choosing sound securities that meet his requirements.*

*Each month we will review briefly the financial situation and outlook and answer several questions of general interest on investment.*

The strength of the bond market was the outstanding financial development of the month of June. The current rise in bond prices has been practically uninterrupted since February and based on an average price of 40 listed bonds we are now within two points of the 1922 peak, which in turn is the highest level reached by the investment market since 1918. Stock prices, too, have improved materially without, however, having the sup-

port of a genuine business recovery as a basis for the movement. In fact, the recent rise in stock prices is in complete contradiction to the actual state of business. Nearly all the leading industries of the country are still in the midst of a real depression. The railroads in their earnings returns and record of car loadings reflect this situation very accurately. Car loadings have progressively declined since the end of March and for the months

*Upon request, information concerning investments will be furnished to readers of MEDICAL ECONOMICS. We will not answer questions regarding purely speculative issues. Address all inquiries enclosing a stamped envelope to the Financial Editor, MEDICAL ECONOMICS, 256 Broadway, New York, N. Y.*



### 7% First Mortgage Bonds That Never Caused a Loss

Miller First Mortgage Bonds are peculiarly suited to the needs of the busy physician.

The 7% interest rate satisfies the demand for a good return on the investment.

The record of these securities—"Never a dollar's loss to any investor"—provides a strong assurance of safety.

And their stable value relieves the owner of the anxiety of watching day-to-day price changes.

A genuine investment, stripped of speculative features—bonds secured by first mortgages on income-earning structures. For full description, write today for booklet, "Creating Good Investments."

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**No Investor Ever Lost a Dollar in Miller Bonds**

of April and May averaged 7.6 per cent. below the corresponding months of 1923. Gross earnings for Class 1 roads taken as a whole have also declined substantially. For the month of May this was strikingly illustrated in the case of the Pennsylvania Road, whose gross earnings were approximately 20 per cent. below those of the same month in 1923.

In face of it all, railroad securities have been leaders in the general rise in stock prices and the only plausible interpretation of this movement is to attribute the rise of the industrial group to speculative activity and the upward swing of the rails to a belated recognition of their real values.

The most important development abroad during the past month was the conference between Premier Herriot of France and Premier MacDonald of Great Britain, at Chequers Court, the official country home of the latter. The exterior details of the conference were the only ones of which the public had any knowledge, but to all outward appearances the meeting of the two Premiers was most cordial. At the conclusion of the conference the announcement was made that subject to the

convenience of the other Allies, a conference would be held in London on July 15 to discuss the problems incidental to the carrying out of the Dawes Plan. Instructions from Washington since have been given to the American Ambassador at London to attend the conference for the purpose of dealing with such matters as affect the interests of the United States and otherwise for purposes of information.

While the status of Ambassador Kellogg is expected to remain that of "observer" for the American Government, his very presence will add prestige, and this fact, together with the evident desire of the French and British Premiers to smooth out past difficulties, augurs well regarding the outcome of the conference.

A word in closing as to the financial outlook. As a general proposition corporate profits are declining and until we have more convincing evidence that business will improve we should advise a policy of caution regarding the purchase of stocks. Bond prices, however, should continue from firm to strong until there is a definite revival in business activity.

## Financial Questions and Answers

### A Diversified List.

QUESTION: Will you please advise me regarding the following list. I want to get as high a return as is possible with absolute safety and your opinion will be much appreciated. \$1000 Grand Trunk Ry. of Canada 6s, 1936; \$2000 Illinois Bell Telephone 5s, 1956; \$2000 Western Union 6½s, 1936; \$1000 Great Northern Ry., general 7s, 1936; \$2000 Illinois Central Ry. 5½s, 1934; \$1000 Dutch East Indies 6s, 1947; 15 shares U. S. Steel, preferred; 10 shares American Tel. & Tel., common; 40 shares Anaconda Copper, common; 25 shares Consolidated Gas (N. Y.), common, and 20 shares Standard Oil of New Jersey, preferred. M. H.

ANSWER: You have selected a very sound group of bonds and for the most part your selection of stocks is excellent. There is some question regarding the appropriateness of Anaconda and Consolidated Gas, common, for one desiring conserva-

tive investments. An exchange of these two stocks for Consolidated Gas, preferred, and American Locomotive, preferred, would improve your investment position materially.

### Several Sound Bonds.

QUESTION: Kindly advise me as to some sound investment bonds available in \$1000 denominations. Safety is my first consideration and my second desire is that they yield 5 per cent. or more. R. L. T.

ANSWER: You will find a sound investment for your funds in the following bonds: Illinois Central 5½s, 1934, yielding 5.2 per cent.; Virginian Ry. 5s, 1962, yielding 5.3 per cent.; Chesapeake & Ohio 5s, 1946, yielding 5.5 per cent.; American Tel. & Tel. 5½s, 1943, yielding 5.4 per cent.; Utica Power & Light 5s, 1947, yielding 5.4 per cent.; Chicago & Northwestern 5s, 1933, yielding 5 per cent., and Brooklyn Edison general 5s, 1949, yielding 5.1 per cent.

(Concluded on next page)



## Financial Questions and Answers

(Concluded from preceding page)

### New York Bank Stocks.

**QUESTION:** Will you be good enough to suggest several New York bank and trust company stocks which you believe are sound investments and attractive to hold for the "long pull?" Also do you regard Anaconda Copper Mining Company 6 per cent. bonds, due in 1953, as a first-class security?

A. F. W.

**ANSWER:** Among New York bank and trust company stocks which may be regarded as sound investments are the following: National City Bank, Corn Exchange Bank, New York Trust Company and the Banker's Trust Company. Anaconda Copper 6s, while not the highest type of industrial bond, are reasonably safe and we do not hesitate to recommend them where a 6 per cent. return is required.

## Current Literature for Investors

The booklets listed below contain investment information relating to bonds. Check the booklet or booklets desired and send page to Financial Department MEDICAL ECONOMICS. Every investor owes it to himself to know the whys, wherefores and danger signals of investing. Hard earned money should never be put into the hands of glib talkers who promise tremendous yields and give nothing but a beautiful specimen of engraving. MEDICAL ECONOMICS is endeavoring to present to the Medical Profession information regarding safe methods of investment.

1. **A Fair Rental on Your Money.** A discussion of interest rates, which is of great value to every investor.  
\* \* \*
2. **Investment Opportunities — Midyear 1924.** A guide to safe investments.  
\* \* \*
3. **Sound Securities for July Investment.** A list of diversified investments on property located from New York to Southern Florida. All yield 7% interest.  
\* \* \*
4. **A Guaranteed Income.** A booklet printing the way to financial independence through the accumulation of Guaranteed First Mortgage Bonds. It shows how to lay the foundation of an income that is secure against changing economic conditions.
5. **Investors' Income Tax Guide for 1924.** Gives in questionnaire form everything regarding Federal income that an investor would want to know.  
\* \* \*
6. **Guaranteed First Mortgage Certificates.** Explains the various advantages of certificates, as regards safety and ability to convert.  
\* \* \*
7. **Mighty Servants of Civilization.** A book which thoroughly describes all types of public utilities and gives the reason for investing in public utility bonds.  
\* \* \*
8. **July Investment Circular.** A circular describing in detail over 150 issues of investment bonds.

## Let the Banker Decide

The widow of a physician went into a bank not long ago and laid down a list of her securities, asking the trust officer what he thought of her investing judgment.

"Decidedly little" was the terse

and emphatical reply, after a perusal of the list.

Her husband, upon his death, three years before, left her approximately \$70,000, much of it in cash in savings banks and mortgages, which were later satisfied.



Instead of consulting a bank in reference to the conservative investment of this money, the widow, shrewdly, as she believed, took her advice from the advertising of various firms, none of which was of first rate.

As a consequence she had loaded up with as fine a collection of "cats and dogs" as could be found in many a day's travel. Oil stocks, "promising" huge returns, were prominent in the collection. Real estate of a most speculative type loomed up large and very few were the securities of real value.

The banker appraised the list at less than \$22,000.

The moral is plain. Every man should invest his savings upon the advice of his banker so that upon his demise the dependents will receive full value.

Let your banker decide.

### The Best Job in the World

Satisfaction is one of man's most valued attributes. The average man thinks that if he had his life to live over again, he would go into an entirely different line of work. He does not desire his children to enter into his vocation and he envies his neighbor who, he is certain, is much more successful.

Each man should feel that his is the best line of work in the world.

Let us take a leaf out of the book of a 76-year-old morning newspaper deliverer in Cincinnati, as told by *Collier's*: "I am up at 4:15 every morning; I get fresh air; I have plenty of exercise; at noon I have time for a good nap; I keep healthy. I've got the best job in the world. I wouldn't trade with you for anything."

How many of us can say the same thing honestly, "I wouldn't trade for anything"?

The practice of medicine should be to each of us "The best in the world."



## Physicians tell us:

*That* in the case of nervous headaches applications of Listerine diluted with water, together with its inhalation from a handkerchief will often prove helpful to the patient.

*Enclosed with every bottle of Listerine, there is a circular discussing in detail the many uses of this product. We believe you will be interested in giving this circular a careful reading.*

## LISTERINE

—the safe antiseptic

Made by

**Lambert Pharmacal  
Company**

NEW YORK ST. LOUIS  
TORONTO PARIS LONDON  
MADRID MEXICO CITY

Also makers of Listerine Tooth  
Paste, Listerine Throat Tablets  
and Listerine Dermatic Soap

## This Month's Free Literature

The brief paragraphs on this page are designed to keep busy physicians informed about useful literature and samples offered by manufacturers of instruments, appliances and pharmaceutical products. Our readers are requested to mention MEDICAL ECONOMICS when writing the manufacturer for this literature.

The subject of artificial limbs is one with which every physician can afford to be at least casually acquainted. A real book of more than 300 pages devoted to this subject, entitled, "*Manual of Artificial Limbs*," is published by A. A. MARKS, 702 Broadway, New York, N. Y. It is a complete exposition of the subject of artificial limbs and is well illustrated to clarify every point discussed. A copy will be sent without charge upon request, if any physician is genuinely interested in the subject.

\* \* \*

In a little 8-page booklet entitled "*Petrolagar*," the DESHELL LABORATORIES, INC., 589 East Illinois Street, Chicago, Ill., describe their product of the same name, telling what it is and stating the cases in which it is especially indicated for Surgeons, Internists, Obstetricians and Pediatricians. Copy sent on request.

\* \* \*

WILMOT CASTLE Co., Rochester, N. Y., have issued a small folder illustrating, describing and pricing seventeen of their most popular sterilizers for physicians. A part of the circular is devoted to an interesting description, with diagrams, of the Castle Automatic Cut-off.

\* \* \*

"*The Sick Baby in the Summer Time—A Dietetic Refuge*," is the title of a very attractive and concise monograph issued by the BORDEN COMPANY, 350 Madison Avenue, New York City. It is devoted to the use of condensed milk in infant feeding.

\* \* \*

"*Some Useful Information for Nurses*," is the title of a brochure giving briefly some of the elemen-

tary principles and approved methods of nursing. It is not intended for physicians, but many desire copies to pass on to their nurses. Copies will be furnished on request by FELLOWS MEDICAL MANUFACTURING Co., 26 Christopher Street, New York City.

\* \* \*

"*What the Microscope Did for Dr. Allison*." An unusual way of presenting to physicians in narrative form the importance of the microscope for really accurate diagnosis. Interesting, as well as instructive. Copies supplied by A. S. ALOE COMPANY, 525 Olive Street, St. Louis, Mo.

\* \* \*

We have just looked over Vol. 2, No. 3, of "*The Clinician*," a little 24-page publication, issued every little while and devoted to everyday clinical problems of the general practitioner. Physicians not already receiving copies will be placed on the mailing list upon request to the RIO CHEMICAL COMPANY, 79 Barrow Street, New York City.

\* \* \*

"*Absorbable Membranes in Surgery*" contains information about two varieties of Absorbable Animal Membranes—Baer's and Cargile. It describes them and gives a good deal of information about their use. Write JOHNSON & JOHNSON, New Brunswick, N. J., for a copy.

\* \* \*

A reprint from "*The Lancet*" entitled "*The Therapeutic Action of Bismuth in Syphilis*" will be sent on request by the ANGLO-FRENCH DRUG Co., 1270 Broadway, New York City.

\* \* \*

Abstracts from Medical Articles

on "Control of Pain and Insomnia with the Non-Narcotic Drug Alonal" very briefly reviews six articles which have appeared in medical publications within the last year. Write the HOFFMAN-LA ROCHE CHEMICAL WORKS, New York City.

\* \* \*

The manner in which Broncho-Pulmonary affections may be treated with Chloro-Phosphate of Lime and Creosote is discussed in detail in a 24-page booklet. It contains a brief history in the use of creosote in therapeutics, a discussion of the values of Chloro-Phosphate of Lime and Creosote and the reasons for combining the two for purposes noted above. Copies may be obtained by writing GEO. J. WALLAU, INC., 6 Cliff Street, New York City.

\* \* \*

THE CALCO CHEMICAL COMPANY, Bound Brook, N. J., describes TOLYSIN in a circular of the same name. It tells what the product is, its therapeutic properties, and gives its description and chemistry.

\* \* \*

A price-list and description of the product *Novocain* will be sent on request by H. A. Metz Laboratories, 122 Hudson St., New York City. This is a 16-page convenient pocket-size booklet.

\* \* \*

"Ovarian Dysfunction" is the title of a little booklet devoted to that subject. It describes usual clinical indications, diagnostic therapy, etc. Sent on request by the Harrower Laboratory, Inc., Glendale, Calif.

The men whom I have seen succeed best in life have always been cheerful and hopeful men, who went about their business with a smile on their faces and took the chances and changes of this mortal life like men, facing rough and smooth alike as it came, and so found the truth of the old proverb, that character goes out and drags in the business, while the timorous ponder and believe, and ever defer action. Deferred action is deferred prosperity.—Hanna.

## AGAROL PLAIN

AGAROL PLAIN is a perfectly emulsified combination of Agar-Agar and Mineral Oil. It contains no Alcohol, Alkalies, Sugar, Saccharine or Hypophosphites.

## AGAROL PLAIN

AGAROL PLAIN offers unlimited usage as a vehicle for a countless number of specifics, such as Salol, Rhubarb, Quinine, Magnesia Calcined (heavy), Cascara Sagrada, Cascara Aromatic, and the Bismuth Salts.

## AGAROL COMPOUND

AGAROL COMPOUND is a perfectly balanced emulsion of Agar-Agar, Mineral Oil and Phenolphthalein. It contains no Alcohol, Alkalies, Sugar, Saccharine or Hypophosphites.

## AGAROL COMPOUND

AGAROL COMPOUND is not habit forming, produces no digestive disturbances, mixes with intestinal content, and eliminates oil leakage. It is an ideal therapeutic aid in the treatment of gastro-intestinal disorders, and habitual chronic constipation.

WILLIAM R. WARNER & CO., Inc.,  
113-123 West 18th Street  
New York City.

---

### COUPON FOR SAMPLE

We will gladly send a full size bottle of either or both Agarol Products to any physician sending name and address on this coupon or his professional stationery or prescription blank.

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.....

## Doctors' Records and Accounts, F. O. D.

(Continued from page 20)

ment at present and whose accounts have been closed.

Such a division is a telling visual demonstration. It informs the doctor at a glance, just where he is. Of course, inactive names may become active and vice versa.

If an M. D. is methodical, he can have bright hued metal clamps or signals to attach to cards of such patients as may require especial attention, therapeutically or fiscally. He can indicate delinquents with a crimson flare, unless he is of a temperament which would make him "see red" automatically when he thinks of their tardiness.

The great trouble with signal systems, and "tickler" technique in general, is, however, that they are likely to become a strain on the patience of the busy man who has to keep up his practice and do his secretarial work at the same time. If he feels so inclined, however, he can keep all his cards together and "signal" his active list.

It is a far easier matter for a physician to send out his own bills than he realizes. If he issues statements every month, and it is very desirable so to do, he can have in readiness the bills with the names at their tops, and, from time to time add the charges, as they appear on his ledger cards. The uncompleted bills can be carried in an ordinary letter file or in a folder until they are ready. By devoting only a few minutes a day to work of this kind, the practitioner will find at the close of the month that he will suffer much less from angina debitoris.

The trend of modern life, and the income tax, make it necessary for the physician to form certain bookkeeping or clerical habits. The methods here indicated can become habitual without being irksome. There are some practitioners, however, strange as it may seem, who are fond of keeping up systems, and who delight

in devising short cuts and schemes for ready reference.

Even they are in danger, as I have been told by index experts, of being consumed by their own zeal, especially in the matter of clinical records and in gathering material for contributions to the medical journals or for lectures.

Nobody really forgets. He may not think of his facts or use them as well as he might, but the mind is, after all, a tablet which takes indelible impressions.

The function of a record is not to tell everything, but to give points or hangers for the recollection, to carry the facts and statistics which are difficult to recall at will. The writer has seen physicians, who before they knew it, were indexing all medical literature and trying to do things personally which they should have employed somebody to do or have left undone.

From a very disinterested source, a circular prepared by a large firm of filing system makers, I cull this line:

"A great deal of what one does and reads clinically may as well be forgotten."

An index of what one does in important cases or of what one has read with keen interest is valuable, however, if it is crisp and concise. The use of keywords, instead of long titles, saves a wonderful lot of time.

Striking abbreviations on the guides of topical indices make for quick reference and minimize brain fag. In the newspaper office, for example, the editors, for the purpose of quick action, refer to a story headed "Beautiful Actress Sues for Divorce" under the sign or slug, "Div," and if there are several divorce cases they would designate the account "Div—Doll." If a physician is keeping a record of diseases he can save himself much time by

(Concluded on page 44)

## Bowel Inactivity

calls for efforts that not only will empty but restore as promptly and satisfactorily as possible, the physiologic action and tone of the intestinal tract. To accomplish this

## PRUNOIDS

has no superior. Absolutely free from irritating effect, this ideal laxative never gives rise to griping or extreme peristalsis, but through its stimulation of natural processes, produces as near to normal—or physiologic—evacuations, as may be possible.

## The "Limping" Heart

is at once supported and regulated by the systematic use of

## CACTINA PILLETS

Thus employed Cactina gradually improves the nutrition and tone of the heart muscle, restores the cardiac rhythm and renders the heart more resistant to irritating influences.

Cactina is a true cardiac tonic without cumulative effect.

**SULTAN DRUG COMPANY**  
St. Louis, Mo.

To Physicians who will write in, mentioning **MEDICAL ECONOMICS**, we will be glad to send liberal samples and interesting data.

## *An Important Message— To Dispensers*

The fact that our products are sold only to physicians, is a vital factor in the success of our 10,000 discriminating Dispensing-Clients. The Doctor who administers S. L. pharmaceuticals, reaps all the benefits, in recalls, refills, repeating profits and increasing prestige.

Ask for catalogue and full details of the S. L. Pharmaceutical Service for the dispenser who is particular about insuring his practice, and increasing his profits.

The Standard Laboratories, Inc.,  
855 West Jackson Blvd., Chicago.

Send me, at once, full particulars covering your Manufacturing Pharmaceutical Service for dispensers exclusively.

Name .....

City .....

State ..... Street .....

(Concluded from page 42)

using such informal abbreviations as "Typh" for Typhoid or "Met" for Metabolism.

Ralph Waldo Emerson, when gathering his materials for essays, used to throw them into shoe boxes or such pasteboard receptacles and then classify them when he was ready to write or the box was full. There was one merit in his system, at least, and that was that it was no very great strain.

Physicians who gather material for books, or lectures or magazine articles, hardly have so much time for leisurely analysis as did the Sage of Concord.

The writer knows of some who follow a plan used by the index department of a large metropolitan paper. It has stood the severest tests under all the stresses of daily journalism. All the material

is made of uniform size. If there is only a small paragraph clipping it is pasted in the middle of a standard sheet, and therefore is in no danger of being lost. This material, whether in the form of penciled notes, or records or statistics, or of pages from magazines, can be readily handled and rapidly assorted for use. It may be kept either in folders or envelopes. The system is just as well adapted for the busy practitioner as it is for the general writer, as it represents maximum efficiency and minimum effort.

In all suggestions for keeping records and accounts, however, it is well to remember that what may be "one man's meat may be another man's poison." Every system needs something of the individual equation to not only prevent it from being an undue burden, but to make it a success.

## Friend, Help-Mate, Wife

(Concluded from page 21)

his wife, know just how hard and strenuous is his work, and how strong a will and how brave a heart it takes to go through cold and heat, darkness and storm to relieve the suffering, and often, perhaps, to be recompensed by criticism and ingratitude.

It is her duty to encourage by finding the best and brightest side of all clouds, and she *must be an optimist*.

Looking back through the years since 1880, when I became a doctor's wife, I wonder that any woman can regard as a sacrifice or hardship anything that aids in the successful discharge of duties in the life of a conscientious doctor, who loves his work as the

means of doing good to his people to whom he is physician, friend and counselor.

To realize that she has helped in such a splendid, far-reaching influence as follows the big-hearted, useful man of medicine, is or should be a wonderful compensation for all her loneliness and anxiety.

My husband and I are now on the down-hill road of life, past the three-score mile-stone. Our children, splendid men and women, are out in the world for themselves, and we are alone in the old home, still the busy doctor and his wife.

May God bless the ones who succeed us in the work, as we have been blessed.

Be courteous to all, but intimate with few, and let those few be well tried before you give them your confidence.

—George Washington.

Sir, my concern is not whether God is on our side; my great concern is to be on God's side, for God is always right.

—Abraham Lincoln.

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## A Side Income for the Doctor

(Concluded from page 23)

The production of baby chicks is the only part of the poultry business we now follow. It pays better and brings quicker returns with less work and less risk. It does not interfere with my practice and never, to my knowledge, have I lost an office or house call on account of my chick business.

My mind used to run on a monorail. I imagined I would lose prestige as a physician if I took an active part in any other money-making enterprise. What has really happened is that I actually increased my practice. It appears that the more money one honestly accumulates the higher goes his stock. The financially successful man commands an added respect not accorded the plodder.

The baby chick industry is in its infancy and in the next five years will develop to at least five times its present proportion. It is growing with leaps and bounds and I am confident there are many physicians, both in the country and in the city, who are so situated that it would be of interest to them to spend a little

time in acquainting themselves with the possibilities of garnering a part of the millions of dollars that are now, and in the future will be, spent for baby chicks.

Location is practically no consideration, as some of the very largest as well as real small hatcheries are located in large cities, while many, both large and small hatcheries, are thriving in villages and on farms.

Chief interest, of course, centers in what financial returns we have received from the venture. If the season of 1924 proves as successful as we have every reason to expect we will have achieved in a few years what it would have taken many years in the practice of medicine to accomplish. From a side income the chick industry has developed into the main income. Our dream of educating our three daughters and of a nest-egg for old age has taken tangible form. We feel we have good reason for being thankful to the wife of the poultry man for the story of success which started us on our way.

## Guaranteed First Mortgage Real Estate Bonds

(Concluded from page 30)

little value.

The principal of amortization is one of the strongest features of the guaranteed first mortgage real estate bonds. Under this plan the mortgage is automatically reduced by monthly payments of principal and interest, each payment being one-twelfth of the amount of the combined principal and interest payments due during the current year. Thus the mortgage rapidly becomes smaller

while the margin of security becomes greater with every payment, so that the depreciation of the property, should there be any, is compensated for throughout the life of the loan.

The deeds of trust or mortgages securing real estate bonds always provide for prompt payment of taxes, assessments, etc., the carrying of ample fire insurance, title guarantees, and remedies in case of default.

The best way to accumulate money is to resolutely bank a fixed portion of your income, no matter how small the amount.—Andrew Carnegie.

A vigorous temper is not altogether an evil. Men who are as easy as an old shoe are generally of as little worth.  
—Spurgeon.





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